

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE OR		OR	OTHER THAN SMALL ENTITY	
FO	R	NUMBE	R FILED	NUMBER E	EXTRA	RATE	FEE		RATE	FEE
BA	SIC FEE	1,7,2	1811 1 18 AND				345.00	OR		690.00
то	TAL CLAIMS	2.	2 minus 20=	. 2		X\$ 9=	18,00	OR	X\$18=	
INDEPENDENT CLAIMS			7 minus 3 =	. 4		X39=	156.50	OR	X78=	
MU	LTIPLE DEPENI	+130=		OR	+260=					
• If	the difference	TOTAL	519.00	OR	TOTAL					
	CI	SMALL E	NTITY	OR	OTHER SMALL I					
AMENDMENT &	B	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	AND F	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	الد .	Minus **	22	=	X\$ 9=		OR	X\$18=	
AME	Independent	· 7	Minus •	7		X39=		OR	X78=	
H	FIRST PRESE	NTATION OF MU	JUITPLE DEPEN	DEM CLAIM		+130=		OR	+260=	
					TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)										
ENT B		CLAIMS REMAINING AFTER AMENDMENT	V is provid	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MENDMENT	Total	•	Minus •	•	=	X\$ 9=		OR	X\$18=	
AME	Independent	•		**	=	X39=		OR	X78=	
F	FIRST PRESE	NTATION OF M	ULTIPLE DEPE	NDENT CLAIM		+130=		OR	+260=	
					TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Column 2)	(Column 3)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
ENT C	\$1333	CLAIMS REMAINING AFTER AMENDMENT	2 16 V2 2 14 1	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	•	Minus	•	=	X\$ 9=		OR	X\$18=	
ME	Independent	·			=	X39=		OR	X78=	
F	FIRST PRESE	NTATION OF M	ULTIPLE DEPE	NDENT CLAIN		+130=		1	+260=	
	If the entry in colu	ımn 1 is less than t	he entry in column	2, write "0" in c	olumn 3.	+130=	<u> </u>	OR	TOTAL	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										

This Form for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09/5/2378

Total Fee Calculation

ı.		Fee Code	Total # Claims	Number Extra X	. Fee	Fcc :	=	Total
•		Sm./Lg.			Sm. Entity	Lg. Entity	-	Total
	it Basic Filing Fee	201/101			345.50		=	345.00
	Total Claims >20	203/103	22 -20 =	_2x			·-	18,00
	Independent Claims >3	202/102		<u>4</u> x	39.00			15600
.	Mult. Dep Claim Present	204/104	•					
,	Surcharge	205/105	•		65.00		ı	65,00
	English Translation	139		•		•		
	TOTAL FEE CALCULA	ATION						<u>584.00</u>
	Fees due upon filing the	he application:						
	Total Filing Fees Due		584. od					•
	Less Filing Fees Subm	iitted -\$						
	BALANCE DUE	= \$	384,00			·		
	Office of Initial Patent	Examination	<u>_</u>					